

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Nita Lowey for Congress

ADDRESS (number and street) ▼

PO Box 271

☐ Check if different than previously reported. (ACC)

White Plains

NY

10605

2. FEC IDENTIFICATION NUMBER ▼

C C00219881

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

NY

17

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☒

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

11 / 27 / 2012

through

M M / D D / Y Y Y Y

12 / 31 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Richard Melnikoff

Signature of Treasurer

Richard Melnikoff

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01 / 31 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 21

Write or Type Committee Name

Nita Lowey for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	2

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	8185.00	8345.00
(b) Total Contribution Refunds (from Line 20(d))	2000.00	2000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	6185.00	6345.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	48548.11	103990.06
(b) Total Offsets to Operating Expenditures (from Line 14)	150.00	150.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	48398.11	103840.06
8. Cash on Hand at Close of Reporting Period (from Line 27)	417573.87	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 21

Write or Type Committee Name

Nita Lowey for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	2

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

3000.00

3000.00

(ii) Unitemized.....

185.00

345.00

(iii) TOTAL of contributions from individuals ▶

3185.00

3345.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

5000.00

5000.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

8185.00

8345.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

150.00

150.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

56.46

56.46

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

8391.46

8551.46

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 21

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	48548.11	103990.06
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	2000.00	2000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2000.00	2000.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	50548.11	105990.06

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	459730.52
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8391.46
25. SUBTOTAL (add Line 23 and Line 24).....	468121.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	50548.11
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	417573.87

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

Eric Bergstol**A.**

Mailing Address 118 Pomona Rd

City

Pomona

State

NY

Zip Code

10970-3510

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Contractor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2012

Transaction ID : C19739493

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

Kenneth Bergstol**B.**

Mailing Address 475 Route 304

City

New City

State

NY

Zip Code

10956-3039

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Contractor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2012

Transaction ID : C19739494

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 21

(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

UBS AMERICAS FUND FOR BETTER GOVERNMENT

Mailing Address 400 ATLANTIC STREET

C/O PER DYRVIK

City

STAMFORD

State

CT

Zip Code

06901

FEC ID number of contributing
federal political committee.

C C00012245

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2012

Transaction ID : C19739701

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

5000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Action Entertainment

Mailing Address 13-17 Route 59

City	State	Zip Code
Nyack	NY	10960

Purpose of Disbursement
Equipment Rental

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2012

Amount of Each Disbursement this Period

300.00

Transaction ID : D547991

B. American Express Merchant Services

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2012

Amount of Each Disbursement this Period

7.95

Transaction ID : D548003

C. American Express Merchant Services

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		05		2012

Amount of Each Disbursement this Period

267.33

Transaction ID : D548004

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

575.28

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Beta Parking

Mailing Address 545 5th Avenue

City	State	Zip Code
New York	NY	10017

Purpose of Disbursement
Monthly Parking

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2012

Amount of Each Disbursement this Period

400.00

Transaction ID : D548002

B. Citibank, N.A.

Mailing Address PO Box 5870

City	State	Zip Code
New York	NY	10163

Purpose of Disbursement
Bank Service Charge

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		10		2012

Amount of Each Disbursement this Period

28.09

Transaction ID : D547977

C. Kimberly L. DiTomaso

Mailing Address 428 W 23rd St, #2B

City	State	Zip Code
New York	NY	10011

Purpose of Disbursement
Campaign Management Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		28		2012

Amount of Each Disbursement this Period

5000.00

Transaction ID : D547995

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5428.09

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Kimberly L. DiTomaso

Mailing Address 428 W 23rd St, #2B

City	State	Zip Code
New York	NY	10011

Purpose of Disbursement
Campaign Management Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 03 / 2012

Amount of Each Disbursement this Period

6500.00

Transaction ID : D548000

B. El Clarin

Mailing Address 40 Broadway

City	State	Zip Code
Haverstraw	NY	10927

Purpose of Disbursement
Print Advertisement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 27 / 2012

Amount of Each Disbursement this Period

1045.00

Transaction ID : D547956

C. FEDEX

Mailing Address PO BOX 1140

City	State	Zip Code
Memphis	TN	38101

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 27 / 2012

Amount of Each Disbursement this Period

40.79

Transaction ID : D547954

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

7585.79

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address PO BOX 1140

City	State	Zip Code
Memphis	TN	38101

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		27		2012

Amount of Each Disbursement this Period

41.62

Transaction ID : D547955

B. Ford Credit

Mailing Address PO Box 220564

City	State	Zip Code
Pittsburgh	PA	15257-2564

Purpose of Disbursement
Monthly Car Lease

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

297.00

Transaction ID : D547961

c. Ford Credit

Mailing Address PO Box 220564

City	State	Zip Code
Pittsburgh	PA	15257-2564

Purpose of Disbursement
Monthly Car Lease

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		28		2012

Amount of Each Disbursement this Period

297.00

Transaction ID : D547997

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

635.62

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Keypost Realty Corp.

Mailing Address PO Box 8197

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2012

City	State	Zip Code
White Plains	NY	10602-8197

Amount of Each Disbursement this Period

1466.66

Purpose of Disbursement
Office RentCategory/
Type

Transaction ID : D548001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Noam Bramson

Mailing Address 201 Pinebrook Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2012

City	State	Zip Code
New Rochelle	NY	10804

Amount of Each Disbursement this Period

3750.00

Purpose of Disbursement
Strategic Consulting ServicesCategory/
Type

Transaction ID : D547999

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Paychex, Inc.Mailing Address 100 Painters Mill Road
PO Box 388

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2012

City	State	Zip Code
Owings Mills	MD	21117

Amount of Each Disbursement this Period

98.54

Purpose of Disbursement
Payroll Processing FeeCategory/
Type

Transaction ID : D547975

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5315.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. PCMS, LLC

Mailing Address 1050 17th St NW Ste 590

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2012

Amount of Each Disbursement this Period

885.32

Transaction ID : D547992

B. PCMS, LLC

Mailing Address 1050 17th St NW Ste 590

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		27		2012

Amount of Each Disbursement this Period

3361.25

Transaction ID : D547952

C. SunTrust Merchant Services

Mailing Address PO Box 6600

City	State	Zip Code
Hagerstown	MD	21741

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2012

Amount of Each Disbursement this Period

346.78

Transaction ID : D547978

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4593.35

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. The Frost Group

Mailing Address 3422 Porter Street, NW

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
12 / 03 / 2012

Amount of Each Disbursement this Period

7000.00

Transaction ID : D547998

B. The Frost Group

Mailing Address 3422 Porter Street, NW

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
12 / 28 / 2012

Amount of Each Disbursement this Period

5000.00

Transaction ID : D547994

c. The Hudson Independent

Mailing Address 19 North Broadway, Ste 2

City	State	Zip Code
Tarrytown	NY	10591

Purpose of Disbursement
Print Advertisement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2012	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
11 / 27 / 2012

Amount of Each Disbursement this Period

1990.00

Transaction ID : D547957

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

13990.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Twenty First Century Group, Inc.

Mailing Address 434 New Jersey Ave, SE

City	State	Zip Code
Washington,	DC	20003

Purpose of Disbursement
Site Rental/Catering

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		27		2012

Amount of Each Disbursement this Period

2000.00

Transaction ID : D547958

B. Verizon Wireless

Mailing Address PO BOX 489

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Cell Phone Service

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		28		2012

Amount of Each Disbursement this Period

317.99

Transaction ID : D547996

c. Verizon2

Mailing Address P.O. Box 15124

City	State	Zip Code
Albany	NY	12212-5124

Purpose of Disbursement
Telephone Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		27		2012

Amount of Each Disbursement this Period

234.59

Transaction ID : D547953

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2552.58

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address 350 Granite Street

City	State	Zip Code
Braintree	MA	02184

Purpose of Disbursement
Office Phone Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		27		2012

Amount of Each Disbursement this Period

811.09

Transaction ID : D547959

B. Verizon

Mailing Address 350 Granite Street

City	State	Zip Code
Braintree	MA	02184

Purpose of Disbursement
Office Phone Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		27		2012

Amount of Each Disbursement this Period

575.03

Transaction ID : D547993

C. American Express

Mailing Address PO BOX 1270

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Credit Card Payment

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2012	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

3002.10

Transaction ID : D547960

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

4388.22

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. CVS

Mailing Address 325 Mamaroneck Ave

City	State	Zip Code
White Plains	NY	10605

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

318.45

Transaction ID : D547964

[MEMO ITEM]

B. Facebook Advertising

Mailing Address 156 University Ave

City	State	Zip Code
Palo Alto	CA	94301

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	2012
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

453.21

Transaction ID : D547966

[MEMO ITEM]

C. FEDEX

Mailing Address PO BOX 1140

City	State	Zip Code
Memphis	TN	38101

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

425.83

Transaction ID : D547967

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Google, Inc.

Mailing Address 1600 Amphitheatre Parkway

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement
Online Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

119.54

Transaction ID : D547968

[MEMO ITEM]

B. Music Express East

Mailing Address 475 Boulevard Ste 3

City	State	Zip Code
Elmwood Park	NJ	07407

Purpose of Disbursement
Transportation Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

495.95

Transaction ID : D547969

[MEMO ITEM]

c. Sarabeth's

Mailing Address 339 Greenwich Street

City	State	Zip Code
New York	NY	10013

Purpose of Disbursement
Catering

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

552.13

Transaction ID : D547972

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Trattoria Vivolo

Mailing Address 301 Halstead

City	State	Zip Code
Harrison	NY	10528

Purpose of Disbursement
Volunteer Meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

3479.62

Transaction ID : D547974

[MEMO ITEM]

B. American Express

Mailing Address PO BOX 1270

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Credit Card Payment

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2012

Amount of Each Disbursement this Period

3479.62

Transaction ID : D547979

C. American Express

Mailing Address PO BOX 1270

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Membership Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2012

Amount of Each Disbursement this Period

75.00

Transaction ID : D547980

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3479.62

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Cosi

Mailing Address 1700 Pennsylvania Ave, NW

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement
Catering

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
12 / 17 / 2012

Amount of Each Disbursement this Period

431.40

Transaction ID : D547983

[MEMO ITEM]

B. Facebook Advertising

Mailing Address 156 University Ave

City	State	Zip Code
Palo Alto	CA	94301

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
12 / 17 / 2012

Amount of Each Disbursement this Period

65.22

Transaction ID : D547985

[MEMO ITEM]

c. Google, Inc.

Mailing Address 1600 Amphitheatre Parkway

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement
Online Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	2012
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
12 / 17 / 2012

Amount of Each Disbursement this Period

151.42

Transaction ID : D547987

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Harris Teeter

Mailing Address 1350 Potomac Ave, SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2012

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Catering

Amount of Each Disbursement this Period

342.91

Transaction ID : D547988

[MEMO ITEM]

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Kron Chocolatier

Mailing Address 5300 Wisconsin Ave NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2012

City	State	Zip Code
Washington	DC	20015

Purpose of Disbursement
Donor Gifts

Amount of Each Disbursement this Period

2100.30

Transaction ID : D547989

[MEMO ITEM]

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

--

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

48543.75

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 21

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Dr. Ron Cohen MD

Mailing Address 246 Harriman Road

City	State	Zip Code
Irvington	NY	10533

Purpose of Disbursement
Partial Refund of 10/25/12 contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		10		2012

Amount of Each Disbursement this Period

2000.00

Transaction ID : D544979

B.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

2000.00
